

Montana Department of Transportation
Right-of-Way Bureau
PO Box 201001
Helena, MT 59620-1001

**COPY FOR
YOUR RECORDS**

ROWForms\PIIn\520

Revised 11/06/09

**State of Montana
Department of Transportation**

Right-of-Way Bureau
2701 Prospect Avenue
PO Box 201001
Helena, MT 59620-1001

RW ID.: NH 16-1(59)1
Designation: MAIN ST - BILLINGS
Project No.: 8717-059-000

County: Yellowstone

Parcel No.: 65

Bargain and Sale Deed

This Deed, made this _____ day of _____, 20____, in consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration now paid, the receipt of which is acknowledged, **witnesses that**,

CITY OF BILLINGS
210 NORTH 27TH STREET
BILLINGS, MT 59101

does hereby **grant, bargain, sell** and convey to the **Montana Department of Transportation** the following-described real property:

ACCESS CONTROL

The Grantor hereby conveys to the Montana Department of Transportation all rights of ingress and egress over and across the limited access control line shown on the plat, consisting of 1 sheet, attached hereto and made a part hereof.

Grantor reserves the right of reasonable access to and from Grantor's property in the SW¹/₄SW¹/₄ of Section 27 , Township 1 North, Range 26 East, P.M.,M., Yellowstone County, Montana.

It is expressly intended and agreed that these covenants, burdens, and restrictions shall run with the land and shall forever bind the Grantors, its successors and assigns.

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This Deed was executed on the date of its last acknowledgment.

(Signature) William A. Cole as Mayor of the City of Billings
(Type of Authority) (Name of Entity)
(Signature) as of
(Type of Authority) (Name of Entity)
(Signature) as of
(Type of Authority) (Name of Entity)
(Signature) as of
(Type of Authority) (Name of Entity)
State of _____)
County of _____)

This instrument was acknowledged before me on _____ (date)

by _____ (name of person(s))
as _____ (type of authority, e.g., president, trustee, member, partner, etc.)
of _____ (name of entity on behalf of whom instrument was executed)

Notary Signature Line

Notary Printed Name
Notary Public for State of _____
Residing at: _____
My Commission Expires: _____ / _____ / 20__

State of _____)
County of _____)

This instrument was acknowledged before me on _____ (date)
by _____ (name of person(s))
as _____ (type of authority, e.g., president, trustee, member, partner, etc.)
of _____ (name of entity on behalf of whom instrument was executed)

Notary Signature Line

Notary Printed Name
Notary Public for State of _____
Residing at: _____
My Commission Expires: _____ / _____ / 20__

Recording Information